Complete Summary

TITLE

Initial management of abnormal cervical cytology (Pap smear) and human papillomavirus (HPV) testing: percentage of adult women diagnosed with initial abnormal cervical cytology of atypical squamous cells of undetermined significance (ASCUS) with high-risk HPV type who have follow-up colposcopy within six months of abnormality identified.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Initial management of abnormal cervical cytology (Pap smear) and HPV testing. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Oct. 32 p. [63 references]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess percentage of adult women diagnosed with initial abnormal cervical cytology of atypical squamous cells of undetermined significance (ASCUS) with high-risk human papillomavirus (HPV) type who have follow-up colposcopy within six months of abnormality identified.

RATIONALE

The priority aim addressed by this measure is that all women who undergo cervical cytologic analysis and receive an abnormal cervical cytology result will receive appropriate clinical follow-up.

PRIMARY CLINICAL COMPONENT

Cervical cytology; atypical squamous cells of undetermined significance (ASCUS); high-risk human papillomavirus (HPV) type; colposcopy

DENOMINATOR DESCRIPTION

Number of women with an initial abnormal cervical cytology of atypical squamous cells of undetermined significance (ASCUS) with high-risk human papillomavirus (HPV) type identified by International Classification of Diseases, Ninth Revision (ICD-9) code 795.05 within reporting quarter

NUMERATOR DESCRIPTION

Number of women with follow-up colposcopy within six months (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

Initial management of abnormal cervical cytology (Pap smear) and HPV testing.

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Group Clinical Practices

TARGET POPULATION AGE

Unspecified

TARGET POPULATION GENDER

Female (only)

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Staying Healthy

IOM DOMAIN

Effectiveness Timeliness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

Women with an initial abnormal cervical cytology result of atypical squamous cells of undetermined significance (ASCUS) with high-risk human papillomavirus (HPV) type isolated

Identify women with abnormal Pap smear results of ASCUS with high-risk HPV type by International Classification of Diseases, Ninth Revision (ICD-9) code. If you are doing this measure quarterly, select a three-month target period that is six to nine months prior. For example, if this measure is to be collected in June, select a target period of October through December of the previous year.

The suggested time frame for data collection is quarterly.

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of women with an initial abnormal cervical cytology of atypical squamous cells of undetermined significance (ASCUS) with high-risk human papillomavirus (HPV) type identified by International Classification of Diseases, Ninth Revision (ICD-9) code 795.05 within reporting guarter

Exclusions

Unspecified

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

Number of women with follow-up colposcopy within six months*

*Women identified in the denominator who have had an encounter with a Current Procedure Terminology (CPT) code of 57452, 57454, 57455, 57456, 57460, 57461 within six months of initial abnormal Pap results.

Review the visit data for the women identified in the target period for clinical follow-up using the International Classification of Diseases, Ninth Revision (ICD-9) code listed. Many medical groups will have access for this data through their clinical data systems and access the CPT codes through their administrative data system.

For those women who have not received a follow-up colposcopy, a chart audit can be performed to determine if care was received from an outside provider. Documentation of follow-up in the chart will be considered meeting the criteria of the measure.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Percentage of adult women diagnosed with initial abnormal cervical cytology of ASCUS with high-risk HPV type who have follow-up colposcopy within six months of abnormality identified.

MEASURE COLLECTION

<u>Initial Management of Abnormal Cervical Cytology (Pap Smear) and HPV Testing</u> Measures

DEVELOPER

Institute for Clinical Systems Improvement

FUNDING SOURCE(S)

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FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

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No work group members have potential conflicts of interest to disclose.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2003 Apr

REVISION DATE

2008 Oct

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: Institute for Clinical Systems Improvement (ICSI). Management of initial abnormal Pap smear. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2006 Oct. 32 p.

SOURCE(S)

Institute for Clinical Systems Improvement (ICSI). Initial management of abnormal cervical cytology (Pap smear) and HPV testing. Bloomington (MN): Institute for Clinical Systems Improvement (ICSI); 2008 Oct. 32 p. [63 references]

MEASURE AVAILABILITY

The individual measure, "Percentage of Adult Women Diagnosed with an Initial Abnormal Cervical Cytology of ASCUS with High-risk HPV Type Who Have Follow-up Colposcopy Within Six Months of Abnormality Identified," is published in "Health Care Guideline: Initial Management of Abnormal Cervical Cytology (Pap Smear) and HPV Testing." This document is available from the Institute for Clinical Systems Improvement (ICSI) Web site.

For more information, contact ICSI at, 8009 34th Avenue South, Suite 1200, Bloomington, MN 55425; phone: 952-814-7060; fax: 952-858-9675; Web site: www.icsi.org; e-mail: icsi.info@icsi.org.

NQMC STATUS

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